DOCUMENT RESUME

ED 301 662 CE 051 395

TITLE	Case Management with At-Risk Youth.
INSTITUTION	Brandeis Univ., Waltham, MA. Center for Human Resources.; National Youth Practitioners' Network.
SPONS AGENCY	Department of Labor, Washington, D.C.
PUB DATE	88
NOTE	17p.; Document contains colored print on colored paper.
PUB TYPE	Collected Works - Serials (022) -- Viewpoints (120) -- Reports - General (140)
JOURNAL CIT	Youth Programs; Fall 1988
EDRS PRICE	MF01/PC01 Plus Postage.
DESCRIPTORS	Agency Cooperation; *Caseworker Approach; Cooperation; Cooperative Programs; Coordination; Delinquency; *Disadvantaged Youth; Employment Programs; *High Risk Persons; *Referral; *Social Services; Youth Employment; *Youth Programs
IDENTIFIERS	*Case Management

ABSTRACT

This issue attempts to provide some initial answers to questions about the use of case management in serving disadvantaged youth. "Case Management with At-Risk Youth" presents some basic lessons synthesized from a review of case management in employment programs and in services for teenage parents, the elderly, and the developmentally disabled. It attempts to describe some important ingredients for case management and some key steps common to case management systems. The second article, "The BEEP (Boston Education and Employment Program) Collaborative: A Case Management Partnership for Court-Involved Youth," offers a counterpoint to the first article. It is an interview with Leo Delaney, a Boston-based practitioner who, in 1984, founded a case management program for court-involved youth. The conversation with Delaney focuses on the issue of how to make case management work and how to create a multi-institutional system that guarantees youth access to services from a variety of agencies when they need them. Delaney's answers come from his experience with one approach--a providers' collaborative that developed a common referral system and clear agreements on access to the services of a number of employment, education, and social service agencies. "CHR Notes" describes some comprehensive programs for disadvantaged youth. (YLB)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

PRACTICAL LESSONS FROM RESEARCH AND PROGRAM EXPERIENCE

Youth Programs

ED301662

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
This document has been reproduced as received from the person or organization originating it.
Minor changes have been made to improve reproduction quality.
Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

Case Management with At-Risk Youth

Hector is a seventeen year old dropout, living on the streets. Barely literate in English and Spanish, he left school two years ago after repeating the ninth grade unsuccessfully. He has never held a steady job and has had several runins with the law. He is alternately charming and angry, and not sure what he wants. He needs, at the very least, basic education, skills training, housing assistance, counseling and a job.

Julia is fifteen, a high school sophomore, and several months pregnant. She has gotten along in school, but she only reads at the seventh grade level. She is planning to drop out of school soon and go to work, though her only experience is as a babysitter. She is going to need help staying in school and staying healthy: remedial education, health and day care, career education and some initial work experience.

Hector and Julia represent a growing challenge for youth practitioners: how to access and manage the increasingly complex set of services needed by at-risk youth. As youth employment and education programs expand their services to those most at risk, they need to coordinate not only employment and training services, but such services as remedial education, family counseling, health, housing, public welfare, and day care. And as the number of organizations involved in serving each youth grows, so do the problems of determining service options, making successful referrals, and tracking client progress over an extended period of time.

For many youth practitioners, the answer to these problems is case management: the use of a broker – the case manager – to help at-risk youth identify, gain timely access to, and successfully complete an individualized set of services provided by a variety of institutions. Case management is not a new idea – social workers and others have made use of it for decades. But it is one that has only begun to be applied in the fields of education and youth employment.

Recently, the Center for Human Resources at Brandeis University was asked to examine case management practices in several fields and to provide some guidance for youth practitioners. What we found was that case management *is* an exciting concept. It offers the potential for customized services, coordination, and a coherent, comprehensive approach to the problems of at-risk youth.

But case management is not a magic bullet. The reality is that an effective case management effort is tough and time-consuming to implement. Whatever form it takes (and it takes many forms), case management is more likely to pave the way for valuable, but incremental, improvements in services rather than wholesale change. Moreover, case management is, ultimately, a "political" system. Case management's success depends in large part on the willingness of established institutions to change their traditional ways of doing business.

This article presents some of the basic lessons that we synthesized from our review of case management in employment programs, and in services for teenage parents, the elderly, and the developmentally disabled. Its goal is not to provide a simple, standard case management formula – there is none. But it does attempt to identify some important ingredients for case management and to describe some of the key steps common to case management systems.

What is Case Management?

One reason why it is difficult to provide a state-of-the-art formula for successful case management is that nobody agrees about what case management actually is.

In This Issue – Fall 1988

Case Management with At-Risk Youth 1
About Case Manangement 2
BEEP Collaborative: A Case Management Partnership for Court-Involved Youth 8
Center Notes 14

Youth Programs **is Published by the Center for Human Resources, The Heller School, Brandeis University, Waltham, Massachusetts, in Association with the National Youth Practitioners' Network.**

CE051396

About Case Management

Case management has long been a common tool in fields as diverse as gerontology, mental health, and rehabilitation. But it is just beginning to be applied in the field of youth employment and education. Our interest in it comes from the recognition that, as we serve increasingly disadvantaged youth — that is, youth with a multiplicity of needs — we need to find ways of organizing and implementing more complex sets of services. At the same time, while we are hearing more and more about case management, none of us are any too sure what it really is or how to make it work.

This issue of *Youth Programs* tries to provide some initial answers to those questions. The opening article summarizes some of what we at the Center for Human Resources have learned about case management based on our reading of the published literature and discussions with a number of practitioners. It is very much a preliminary discussion — we are working on a more thorough guide for this Spring. But, we wanted to pass along at least some of what we have already learned about the essential elements of an effective case management system and the key steps in the case management process.

The second article offers a nice counterpoint to the first. It is an interview with Leo Delaney, a Boston-based practitioner who, in 1984, founded a case management program for court-involved youth. Our conversation with Delaney focused on the issue of how you make case management work, and how you create a multi-institutional *system* that guarantees kids access to services from a variety of agencies when they need them. Delaney's answers come from his experience with one approach — a providers collaborative that developed a common referral system and clear agreements on access to the services of a number of employment, education and social service agencies.

With this issue we also find that we owe our subscribers, some of whom have called looking for our Summer issue, an apology and an explanation. As many of our readers know, this is the first year in which we have tried to publish *Youth Programs* on a quarterly basis. That is quite a challenge, and it has taken us longer than expected to get the hang of it. As a result, this is only the third issue this year — there was no Summer issue.

We do expect that, with practice, we will be issuing *Youth Programs* on a more regular schedule. In the meantime, we want to reassure our subscribers that you will still get a full four issues with your subscription. And if you haven't subscribed to *Youth Programs*, we still hope you will join us by using the return postcard enclosed in this issue. The subscription price is only $25 for four issues for individuals and $50 for institutions. For more information, write or call us at the Center's toll-free number: (800) 343-4705.

Case Management, continued from page 1

After reviewing the literature on the use of case management with the elderly, James Callahan, a Brandeis University policy expert, concluded that it has become "a Rorschach test. Each professional tends to understand case management based on his or her own setting and experience." Others have drawn similar conclusions, commenting that the term is "mired in controversy and confusion" and that "its functions have been interpreted in disparate ways, often making case management a paradoxical assortment of activities...."

Common Definitions. Some common themes, however, can be found. One authority, the Joint Commission on Accreditation of Hospitals, defined case management services as "activities aimed at linking the service system with a consumer, and coordinating the various system components to achieve a successful outcome. Case-management is essentially a problem-solving function designed to ensure continuity of services and to overcome systems rigidity, fragmented services, misutilization of certain facilities, and inaccessibility."

A second definition echoes the first: "At the systems level, case management may be defined as a strategy for coordinating the provision of services to clients within that system. At the client level, case-management may be defined as a client-centered, goal-oriented process for assessing the need of an individual for particular services and obtaining those services."

As we reviewed more than a dozen definitions, several consistent ideas emerged. Case management is an approach that seeks to make service delivery:

- Integrated
- Coordinated
- Accountable
- Sequenced
- Sustained
- Client-Centered
- Goal Oriented
- Flexible
- Cost-Effective
- Comprehensive

It can best be appreciated as an opportunity for institutions to link with other institutions in a coordinated fashion that ultimately benefits the client because it:

- incorporates a coherent, sequential, multi-dimensional, problem-solving approach;

- locates the client within a particular "life space" and social framework;

• seeks to stimulate change both within the client and the overall environment of which he or she is a part.

Why is Case Management Needed?

At-risk youth have needs that are often complex and intertwined. They require help determining which among a variety of services they need, when, and in what order. They require assistance finding and accessing those services, and support to successfully complete those services.

Human service institutions, on the other hand, are often one-dimensional and specialized. They typically offer services that are funded and provided as separate entities: housing is the niche of one agency, education that of another, and job training that of a third.

The result is that there is often a mismatch between the behavior of the helping-professions and the needs of the youth whom those services intend to help. Without case management, interventions are often uncoordinated and scarce resources squandered. A young person can easily fall through the cracks or give up trying to navigate what is, in most locales, a disjointed multi-institutional "non-system." The function of case management is to overcome the mismatch between institutions and client needs and to provide the continuity of services that is critical for at-risk youth.

Effective Case Management

In order to locate and walk a young person through a sequence of services, the typical case management system has the following components:

- Finding and attracting appropriate clients;
- Intake and assessment;
- Designing a service plan;
- Intervening in the community: brokering, advocating, and linking;
- Implementing and monitoring the service plan;
- Evaluating the effectiveness of case management.

What makes these activities effective, however, is the philosophy or approach that guides them. As we reviewed the literature and talked with practitioners, four major themes stood out as central to almost every aspect of the case management process:

Case Management Requires Partnership. Case management is, first and foremost, a system of partnerships: between case manager and client, and between organizations. In an effective case management system, the case manager works in partnership *with* the client, sharing responsibility, rather than working *on* the client. There is a division, rather than a substitution, of labor. Case management also involves partnerships among institutions. At some level, each must be willing to be flexible and to share access to services or resources. In that context, the case manager works for all the partners, helping institutions access clients, and linking clients with those institutions that offer the services young people need.

Case Management Must Provide Predictability. Many disadvantaged youth experience life as a series of random events over which they have little control. Successful case management systems work to rebuild that sense of control and predictability by helping young people to plan, to set goals, and to undertake a systematic process of meeting those goals. Young people learn that they can make choices and that their actions lead directly to concrete outcomes.

Case Management Demands Accountability. Client trust and effective coordination rest on the delivery of promised services. For case management to work, clients, case managers, and institutions must be clear about their roles and responsibilities; tasks and associated timelines must be written down; and ambiguity must be replaced by explicit agreements. When accountability is not clear, case management systems break down.

Case Management Communicates Respect for the Client. The success of any case management effort depends on the degree to which the young person is engaged in the development and joint ownership of a remediation plan, and has a major stake in insuring its success. A strategy that is imposed with little regard for a client's interests or concerns has little chance to bear fruit. In every aspect of case management, then, the client has to be treated as a mature, responsible adult – not as a number or a child.

Making Case Management Work

These themes set the context for case management and shape much of what takes place in each step of the case management process.

Finding and Attracting Appropriate Clients. The initial contacts with a case management system are an important opportunity to establish a relationship and set expectations. Predictability and accountability should be hallmarks of those contacts. Potential clients need to be oriented to the purposes and structure of case management, what it can and cannot provide, and what their responsibilities will be. They should clearly understand early on that case managers work in partnership *with* them, not *on* them, and that development of a case management plan may constitute a commitment to long-term services.

Equally important, those initial contacts need to convey an attitude of respect. Case managers and their supporting service providers need to show a genuine feeling of enthusiasm, caring, and dignity to the youths who approach them. This includes initial telephone contacts. No contact with a young person should be conducted in an impersonal, bureaucratic manner: it will only turn that young person off.

Lastly, case management is not for everyone. To be effective, a case management system needs to identify a target population that can benefit from long-term, holistic services, *and* that is amenable to receiving them. The marketing and outreach campaign needs to be clear about what is being offered while highlighting the benefits of a long-term, individualized approach.

Intake and Assessment. Intake and assessment should also be caring, professionally-handled experiences that communicate respect to the client.

The enrollment process sets a tone for an on-going relationship. When the case manager (not a clerical functionary) interviews the client, he or she should retrieve not only the information typically sought in the organization's regular intake process, but also data related to comprehensive, long-term services. This information will contribute to current and later accountability. At the same time, to contribute to the client's sense of predictability and partnership, care must to be taken to inform him or her about *why* data is being gathered and how it will be used.

The most effective assessment tool is a series of personal appointments in which the case manager hears, sees, and senses the young person's situation. The case manager can learn who this person is, what strengths can be worked with, and what vulnerabilities must be compensated for. Interviews should shed light on such questions as:

- What social skills does the client possess? How developed are verbal and expressive capacities? What affect and emotional tone are conveyed? How organized is the client? How does he or she describe problems, possible solutions, and future ambitions?

- What support network already exists? Who within the client's environment can be turned to for help? Are there role models?

- What is the client's school history? What problems crop up and when? Do patterns emerge in the relationship of the client to teachers and school authorities?

- What is the client's employment experience? What issues recur? What vocational interests are expressed? Are the client's expectations realistic?

- What is the client's service history? Is it possible to pick up where a previous service provider left off?

Assessment will probably also involve testing; however, it is important to choose tests capable of generating information that is accurate and that a program will actually use. Many testing instruments exist; however, no one test renders a complete understanding of a client's problems and potentialities. In addition, unless testing is related to real program options and can help determine which options make sense for a client, the entire process becomes a misleading exercise. Respect for the client leads to the rule: "collect all the information you can use, and use all the information you collect."

In sum, the intake and assessment process helps map out the terms of the case manager/client partnership, subject, of course, to revision and renegotiation. But it is equally important to note that, while there are advantages to gathering lots of good data up front, assessment is an ongoing process. The case manager will need to work hard over time to develop a relationship with the client and to continually track his or her progress.

Designing a Service Plan. The alliance between case manager and client is intended to bring about change. The case manager works in partnership with the client to develop clear

expectations and set realistic goals. The client's views of what she or he wants must be acknowledged, respected, and then tempered with the case manager's input about reality.

How goals are subsequently translated into changes, through what means, and over what period of time are issues that are addressed and pinned down in a written service plan. To assure predictability, the case manager needs to explain how one service precedes another, and to help the client sequence each service. Together, they work as partners to formulate a written contract that assures mutual accountability — one that delineates their respective responsibilities and is explicit about the nature of the partnership being agreed to.

An ideal plan includes long-term goals accompanied by short-term objectives that are quickly achievable — the client can experience regular, *bite-size* wins. The plan translates those objectives into the services necessary to achieve them, and identifies organizations or individuals who provide these services.

A well-designed service plan ensures client ownership. Specific, mutually defined tasks, clear timelines, and delineation of mutual roles help the young person feel that it is his or her plan, and that he or she is empowered to carry it out. To reinforce the ownership, predictability and accountability represented by the plan, the case manager should also include dates to review the plan with the client, and a projected date for termination of case management.

Intervening in the Community: Brokering, Advocating, and Linking. For a case manager to make effective referrals, institutions at the receiving end must have slots available on an as-needed basis. They must be willing to grant timely admissions to their programs, rather than placing the client on a waiting list. Ideally, the case manager can say, "I need my client enrolled in your program this week," and have it happen. Persuading institutions to do this is not easy.

Agencies providing case management have taken a variety of approaches to the referral process. Some place primary responsibility for identifying and securing services with the case manager, who works to develop needed slots on a case by case basis. Other agencies have organized the referral process more formally by assigning the task to a "resource developer" who secures service slots from agencies in the same manner as job developers have traditionally obtained employment slots from businesses.

Both of these approaches, however, are far from ideal. Both are essentially piecemeal approaches that do little to encourage institutions to move away from "business as usual." As a result, case managers and "resource developers" continue to face problems securing slots. But approaches lack predictability: the case manager cannot guarantee a slot to the client; and accountability agencies are not accountable for failure to provide services. And neither can guarantee respect for the client. Institutions have no rules or buy-in related to this aspect of client services. While both approaches place a case manager in charge of identifying and linking together a sequence of services, they offer few tools for assuring the quality of services or that the necessary linkages will actually take place.

The tools needed to assure timely referrals and to institutionalize case management over the long-term are most likely to result from the creation of a "formal" inter-agency partnership or providers' alliance in which member institutions empower case managers to "requisition" slots across institutional boundaries. Formed specifically to enable case managers to arrange fast admission to services for their clients, these collaborations can be organized with clear rules that ensure accountability, communicate respect, and build in predictability. (See the discussion of the Boston Education and Employment Project in this issue for information on one case management alliance.) Collaborations of this type take hard work to develop and maintain. But without the establishment of a network of explicit agreements — partnerships — case management is unlikely to offer significant improvements over the existing service delivery system.

Implementing and Monitoring the Service Plan. The partnership between client and case manager continues in accomplishing the terms of the service plan. That process involves a division of labor in which the young person carries his or her weight: showing up for appointments, enduring testing, attending training classes, etc. The case manager provides oversight, ensures coordination and continuity of service, and gives the youth opportunities to show initiative and develop competence. The relationship is dynamic and shifting, sometimes requiring hand-holding, sometimes stern lectures ("tough love"), sometimes nagging, sometimes a gentle push to risk "going it alone" — always based in respect.

A case manager skilled in the use of referral procedures can help a young person become an active partner in his or her own service plan.

After assisting a client to identify the problems he or she faces, translating those problems into service needs, and giving each an appropriate priority, the case manager generates a set of service options from which the client can choose. Before choosing, the case manager and client discuss how each option might meet the client's needs — issues such as the reputation of each agency, their eligibility requirements and fees, the amount of time the client will have to spend in service, and agency locations and proximity to transportation.

Once the client has chosen an option, he or she needs to hear about the referral procedure in simple step-by-step terms. Ideally, the client will then, in the case manager's presence, call a known person at the referral organization and schedule an appointment. In all cases, the client should write down the appointment date, time, contact person's name, and directions to the referral agency. Predictability is the watchword.

The case manager also needs to determine how much additional support the client needs to carry out the referral successfully (transportation, hand-holding, baby-sitting, etc.) and help the client arrange for that support.

To ensure accountability, the case manager usually contacts both the client and the referral agency shortly after the client's appointment to identify what transpired as seen through the eyes of both parties — perceptions often differ. The client and case manager can then determine what the client's next steps are, how the case manager can support their implementation, and whether a revision of the service plan is called for. These tasks are written down and become part of the service plan. Of course, if the client did not attend the appointment as planned, it is through such monitoring that the case manager learns that corrective action is necessary.

After a client has been successfully placed into a program, the case manager monitors the placement to assure that it meets the needs set forth in the service plan. If the client completes a service, he or she can then move on to the next (predicted) aspect of his or her service plan. On the other hand, if the client is unable to achieve his or her goals through the referral, it may be time for the case manager to intervene with the referral agency, or even to review and adjust the service plan.

Accountability and predictability in implementing a service plan also depend on communication among the service providers. As much as possible, there should be regular team meetings, face to face, with the various human service workers associated with each case. Problems must be worked out, histories shared, expectations established. Team meetings (case conferences) are at the heart of "continuity of care."

Finally, the long-term goal of any service plan should be for a client eventually to no longer need case management. Partnership, predictability, accountability and respect are all aimed at helping young people to complete their service plans, learn how to access other services on their own, and feel ready to handle life without professional intervention; in short, to be ready to break from case management dependence.

Evaluating the Effectiveness of Case Management. Case management is expensive and time consuming. It is important, therefore, that its results be evaluated. Some of the questions that need to be asked are:

- Over several years, do the numbers — financial analysis, placements, positive terminations, etc. — bear out what practitioners' gut-level views may have called "success?"

- Have the services and resources to which clients have been referred been appropriate and adequate to meet their needs? Was case management effective at accessing and coordinating those services and resources?

- What has happened to clients one year, and two years, after ceasing case management support? What might have happened if case management had not been provided?

- If evaluation indicates that case management may not have been successful, should it be discontinued, or could some adjustment make it viable?

While these are tough questions, they are critical to understanding if case management is working and whether the effort going into it is ultimately paying off.

The Case Manager's Role

The basic principles of case management point to a multifaceted role for the case manager. In essence, case managers are "jacks of all trades." They stimulate, coordinate, and monitor service delivery so that youth do not fall through cracks. They do whatever is necessary to remove barriers hindering a client's advance towards self-sufficiency.

According to one text, case managers "help clients develop and effectively utilize their own

internal problem solving and coping resources, and facilitate ongoing interactions between resource systems to enable those systems to work together more effectively. Case managers facilitate and improve interaction between staff within resource systems to promote the effective and humane operation of these systems and to make them responsive to client needs. They establish linkages between clients and resource systems, and between resource systems themselves to make them accessible to each other. They develop new resource systems to meet the needs of clients." [Anne Minahan, "Generalists and Specialists in Social Work," *Arete* (Fall, 1976)]

Case managers serve as surrogate parents, role models, counselors, social entrepreneurs, and political advocates. They nag, cajole, prod, and encourage clients. They pressure institutions to act responsibly or lubricate the gears between institutions. They make referrals, and monitor client fit. They deal with the client's family life; work and school; social services and public institutions. They alter client behaviors – strengthening client capacity to exercise self-determination and autonomy.

Qualifications for Case Managers. What are the proper qualifications of a case manager? They vary according to the context. A national study examining 140 case managers in six cities, for example, found that roughly a third had less than a college degree, 55% had four years of college and only 15% were master's level. Social work training was typical, but not obligatory. Case managers serving teenage girls often had a nursing background. Ex-gang members sometimes did case management work with gangs. At times, parents served as case managers for developmentally disabled children.

Disciplined Empathy. Case management qualifications reflect local environments; nevertheless, some cross-cutting criteria can be identified. For example, effective case managers seem to exhibit what might be called "disciplined empathy." They respect and care about their clients, and can develop partnerships with those clients. They listen to what clients say, read between the lines, and size them up. They can work with the client to develop a service plan, and can have the client "buy in" to it as if it were his or her idea in the first place.

Effective case managers demand accountability from clients. They have a compassionate but tough-minded understanding of the youth they work with – an ability to develop a therapeutic alliance, and to challenge and confront kids to meet their end of the bargain.

Partnership Skills. At the same time, case managers have to have the skills to develop partnerships with institutions. Diplomatic sensitivity is a key trait. Case managers negotiate with bureaucracies for services. To do so well requires adept social skills, and an ability to read institutional cultures. Crossing jurisdictional lines entails a delicate balancing act – doing business on someone else's turf. Out-stationed staff must be able to assert client interests, while being creative and flexible enough to make case management complement the mission of the host.

Being indigenous to, or at least to have a working knowledge of their community can be a plus for a case manager. Being of the same racial or linguistic background as the majority of clients is also desirable. Neither is a precondition.

It also helps if case managers have a human services orientation. They need to adopt a philosophy that barriers to client self-determination are *both* internal and external, and constantly interact. Interventions must aim at changing both the individual and the environment.

Entrepreneurial Ingenuity. Finally, case managers should exhibit entrepreneurial ingenuity. Because resources are not immediately accessible, effective case managers need to be able to fashion client support networks from resources under others' control. They need to be able to mediate alliances among competing agencies, establish trust and articulate mutual interests.

Staff Development Key. It must be acknowledged, up front, that it is rare for an organization to hire an ideal, ready-to-operate case manager. In fact, it is neither feasible nor desirable that case managers have a standard resume. Rather, good case managers are created. They enter the field with solid "raw material," but it is training that molds them into effective professionals.

The key to that process is on-going staff development that acquaints potential case managers with the multiple elements of good case management, and conveys the capacity to

continued on page 15

The BEEP Collaborative: A Case Management Partnership for Court-Involved Youth

In 1984, eight community-based organizations, the city's JTPA administration, and a state agency responsible for youthful offenders, joined together to create the *Boston Education and Employment Program* (BEEP), a case management partnership linking youthful offenders with employment, education, and other support services.

BEEP's experience in creating a case management collaborative provides some valuable lessons for youth practitioners. Developed for a "hard-to-serve" population, BEEP is an imaginative, multi-agency effort by practitioners to design and deliver a complex, comprehensive set of youth services. The partners in BEEP had to develop a service strategy, negotiate roles and responsibilities, address differences in policies and practices, and overcome turf issues — all problems that are being faced by more and more practitioners today.

Leo Delaney, then the Director of the Boston Employment Resource Center (BERC), was the moving force behind the creation of the BEEP collaborative. (BERC was a part of Massachusetts Halfway Houses, Inc., a nonprofit agency specializing in services for ex-offenders.) Delaney came to that position armed with impressive credentials in post-release, transition services for offenders. He also had first-hand experience in establishing partnerships through his work setting up a statewide inter-agency collaborative serving individuals who had been released from prison.

We spoke with Delaney, now the Executive Director of the Ellis Memorial Center, a century old social service agency, about what was involved in creating a case management partnership. We asked him what considerations led to the decision to use case management; how agencies were brought together; and what problems were confronted in creating a system of case managed services.

The BEEP Collaborative

CHR: What is the BEEP collaborative and how did it get started?

DELANEY: The Boston Education and Employment Program — BEEP — helps court-involved youngsters gain access to the education, employment and social services they need to re-integrate into society. Basically, BEEP is a system of agreements between BERC, several alternative education programs, youth employment programs, health clinics and others that guarantees a young person quick access to services in each agency. There's a central intake point and a case manager who works with kids to make sure they get the services they need. As their part of the collaborative, the other agencies make a commitment to provide priority services, to work with a common assessment process, and to accept the case manager as a partner in the service process. It sounds simple doesn't it?

The program got started in 1984 when the City of Boston's JTPA administration received discretionary money to test whether collaboration among human service institutions could improve services for at-risk youth. The city agency was interested in court-involved kids, and we were interested in collaboration since court-involved kids would need more services than my agency — BERC — alone could provide. Once the RFP was issued, I began talking with people I knew in some of the agencies that provided education and employment services and, eventually, several of us jointly wrote a proposal.

Responding to a Variety of Needs

CHR: What was the idea behind the program design? Why develop a case management collaborative?

DELANEY: As we thought about the proposal, we talked about what we needed when we were adolescents, and we also considered what the young people and ex-offenders we worked with regularly asked for. Some clear patterns emerged.

We knew that the kids would need jobs, and help in preparing to get jobs and keep them. We'd also need job development. BERC was already good at employment services and job development, so in the employment area, BERC seemed strong.

We knew that education would be important. Kids would need immediate access to a variety of educational programs — high school

alternative programs with dimed high school credits, basic skills remediation programs, GED preparation programs. Some kids might want to go back to the public schools first.

We had to have financial resources to cover kids' immediate, short-term needs — clothes, food, and the like. We often had clients who needed presentable clothes so they could get a job, and perhaps another set to hold them over until they got a paycheck. It was also common for clients to show up at our doors hungry. They needed a full stomach before they could begin to pay attention to school or jobs. Some needed public transportation passes to get around the city. Some needed some pocket money to carry them over for a while. Some needed psychological support services or rehabilitation services, child-care, substance abuse treatment, and other programs. Kids also need recreation, especially if they've been out of school — sponsored gym for adults. They need sometime physical to get out their aggression constructively. In any case, we knew we had to be able to address those kinds of needs.

Needing an Advocate We knew that the kids we served would need someone to advocate for them — to care, to push, to help sort things out, to help get what they needed. They couldn't necessarily count on parents to do that — some of them didn't have much of a parent/child relationship at all. Some adult had to be there for the kids — to help them weed their way through the system and to troubleshoot obstacles, too. That was what led us to the emphasis on an advocate, or in social work jargon, a "case manager."

Finally, we knew that these young people also need immediate gratification. We had to be able to arrange access to a variety of resources *quickly*. Kids won't tolerate having to repeat themselves nine times just to meet various agencies' intake criteria! They want to only have to deal with one place, and expect that place to handle all the rest.

Case management seemed the best solution. Case managers would advocate for the kids and deal with the fragmentation among agencies so the kids weren't faced with it. It wasn't the kids' fault that each agency had its own system. Case management would also mean that there would be one centralized intake point so that kids could go to *one* place rather than jump from agency to agency. A kid could lay out his or her life story with us at BERC, and us alone. Then we could handle the kid's case with the other organizations. We could develop a comprehensive "information base" on each kid, and have our case manager use that data to fulfill the needs of any agency to which we needed to refer the kid.

Securing Partners

CHR Given this sense of kids' needs, and your decision that BERC should be "lead agency," how did you choose the other organizations that would be involved in the collaborative?

DELANEY After we'd drafted the list of services we thought we'd need, I drew upon my personal knowledge of Boston's programs.

I also thought a lot about the *individuals* that I wanted as partners. It isn't just the organizations that are important for a collaborative, it's also the *people* within those organizations who would make institutional "buy-in" possible. I considered who in the human service community I knew, who I liked, who I respected, who could I make deals with, and who could move some unorthodox things through their agencies. They had to have power and influence. They couldn't be too low on the totem pole in their own organizations.

CHR So how did you get them to work with you? What was the incentive for an organization to join BEEP?

DELANEY There are several answers to that. In terms of the initial buy-in, I met with each person privately and structured individualized deals depending upon who I talked to. I sought what they had that I needed — slots for training, education or other services — and offered what I could in return. In general, I appealed to their self-interest, and tried to give each institution several reasons for working with *me*, for working with other organizations, for taking part in a collaborative effort.

Let me give you some examples. I would have liked each agency to serve my kids through their existing funding systems. In some cases agencies would do that, because they needed BEEP kids to meet their own targeting and enrollment requirements. But plenty of times that wasn't possible. So, I offered to buy slots on a fee-for-service basis. In other cases, I offered free training for their staff in return for their participation. Sometimes extra support service money attracted them — funds to help their clients in ways they couldn't otherwise handle — and I had funds at BERC to do that.

I want to be clear, this wasn't a situation where I said I'll give you stuff in return for some vague type of "cooperation." There was a concrete, and often risky, trade. They had to be willing to change their way of doing business. For example, I didn't just want slots in their programs. I wanted immediate admission, whether they had a waiting list or not. I expected them to open up doors that would otherwise have taken months to get through. When they got a call from a case manager, they had to give priority admission to the young person represented by that case manager. So, where I had something of value to offer, I was looking for something valuable in return.

The Benefits of Collaboration

CHR: You've talked about how you attracted organizations to the collaborative. Over the long run, what turned out to be the real incentives for involvement in the collaborative?

DELANEY: There were many, and they varied from agency to agency, and from person to person.

First, BEEP provided an opportunity to successfully serve a very difficult population that most of the organizations saw regularly, but couldn't work well with. The agencies had that in common. They'd never done a good job with court-involved kids, and BEEP was certainly worth a try.

Another obvious reason to work together was funding. Our grant gave us financial resources to do what we needed to do. I was able to negotiate subcontracts with some of the agencies. I could buy slots for kids they otherwise wouldn't take or couldn't handle. If an agency didn't have funding to cover the costs of serving a particular kid, we could purchase that service from them. That way, collaboration would not drain their budgets – they knew they wouldn't lose money because they collaborated.

A Place to Trade Ideas. A third major incentive – one that we didn't realize at first – was that through the process of working together, agencies got to learn about one another's techniques: what worked and what didn't. We educated each other. At one meeting, one BEEP member asked another, "What do you do when a kid shows up drunk for his counseling appointment?" That question set off a whole new realm of cooperation. We traded a lot of good ideas. Before BEEP, we'd never had a good forum for talking about this stuff.

As another example, one education program had an extraordinary attendance rate. The collaborative gave the other agencies the chance to find out what that program was doing that was so effective. They took some of those ideas back to their agencies, and improved their own programs commensurately.

Once we recognized what was happening, we took it a step further. We set up a sub-committee of the educational sites to to develop mutually-agreed-upon performance standards, to learn about each others' incentives and reward systems, to hash out transportation issues and so on. While that was going on, our best case manager worked with counselors and teachers from the programs to improve their skills with youthful offenders: how to deal with them, how to set limits, how to be supportive, and so on. BEEP gave us all a chance to work together toward a common goal. For the first time, we had the same mission – *together* to serve kids in the best way possible.

A Chance to Cut Red Tape. Another bond between us was that all the council members had earlier been frustrated with red tape. Before BEEP, we all had fought the bureaucracies inside and outside of our own organizations. BEEP was attractive because it was based on a philosophy that "the rules" shouldn't get in the way of meeting kids' needs. BEEP gave us an excuse to do things differently. We were not going to let our bureaucratic systems, well-meaning though they might be, get in the way of doing what had to be done for a kid. In other words, we didn't force kids to fit the system, we forced the system to adjust to the kids.

Finally, the BEEP collaborative was new and exciting. It gave agency leaders a chance to work with each other. Boston's youth serving agencies had always competed with each other for funding. BEEP gave them a reason to put competition aside and work together.

Negotiating Common Strategies

CHR: Did you run into any major problems along the way?

DELANEY: Oh, yeah! From the beginning, we had a lot of work to do, and none of it was easy. We had to deal with referrals, the intake system, what we wanted, what we wanted to correct, and so on. We argued about data collection, what we'd need and wouldn't need. We all had our biases. Sometimes we "clawed" each other pretty good enroute. We certainly had

plenty of heated discussions.

For example, we had to work out what information was really needed by each agency to serve a client effectively. It took a couple of meetings and a lot of newsprint charts just to remodel my original vision of the intake system into what the other institutions wanted. We hashed out what information BERC would provide to each agency to fit their unique intake and reporting requirements, and we agreed that they would not do their own intake procedures on top of the ones BERC would do. We ensured that the numbers reported to JTPA by BERC and the agencies would not be double counted.

Testing was another example. There were two major issues: who should do testing and what tests should be used? Although I'd originally envisioned BERC handling *all* assessment, some agencies felt otherwise. They stressed that BERC was an employment center. Its assessment was geared towards employability. So although BERC could do a good job with employment assessment, the other agencies felt that educational testing, academic background, and other educational assessment should be handled by the educational sites. After some impressive fights, the council decided that testing would be done by two of the educational programs. That was a real compromise, but one that was necessary to secure those programs' cooperation.

Then we had arguments about what tests everyone would accept. Practically every agency used a different test, and felt that its own testing procedures were best. There were major battles about uniform assessments: what needed to be included and what didn't. A compromise resulted. It was agreed that we could all accept, for better or worse, the TABE.

Case Manager Authority

CHR: What would you say was the toughest issue?

DELANEY: Case management was the piece that made BEEP work, but at first some aspects of it were hard for some of the partner agencies to accept, particularly the case manager's continuing authority once a referral was made. The partners had to agree, for example, that they would not expel a BEEP youth from their program without the case manager's agreement. Agencies were willing to collaborate. They were willing to take immediate referrals. But many of them asked, "Why should the case manager have all this influence and power over kids once they're in our programs?"

It took them a while to recognize that the case manager had already developed a personal relationship with the client – one that could be used to the kid's advantage – one that the partner institutions didn't have. And, after all, a key philosophy behind case management was to *not* force the client to develop new trust relationships with service providers everywhere he or she went.

Eventually all the partner institutions realized that the case manager had to have final say over what happened to a kid in BEEP. The case manager had to be involved in interpreting assessment results, defining what program the kid should enter, and deciding whether the youth should be terminated from a program or transferred to another.

This was a critical point. The case manager was the *one* person without whom everything might fall apart. If kids could take the risk to develop a relationship with the case manager, they might have a chance. The case manager was someone they could count on. They could trust one person, and the agencies would make sure that if the case manager promised something it would be delivered. These kids didn't have much else in their lives that was that solid – promises that would be delivered.

Qualities of a Case Manager

CHR: Could you define the most important qualities of a case manager?

DELANEY: Let's talk first about the case manager's relationship with kids. A case manager needs to intermix kindness with firmness – to know intuitively when to be supportive and when to really chew the kid out. Our best case manager let kids know she cared, but she made her bottom line very clear. She spoke softly, but kids listened. She gave a lot of kids something they didn't get anywhere else – she showed them that she cared about them while giving them structure. She expected them to fulfill their part of the bargain, and she did what she said she'd do. She'd really come down on them if they didn't do their part, but they respected that because they knew she cared.

Not a Nine-to-Five Job. Case managers also have to work hard. They have to hustle. They can't do their jobs at their desks. They have to go out to the kids. They have to juggle schedules. My best case manager used to tell me that she kept her schedule open between 11:00 a.m. and 2:00 p.m. each day because she knew there would be problems coming. She also

didn't view case management as a nine-to-five job. She would get up at 6:00 a.m. to make wake-up calls to clients so that they'd get up for school. When her clients had trouble, got picked up by the police, or had to appear in court, she'd be there with them.

The case manager also has to be responsive, whether dealing with kids or institutions. When our case manager said she'd do something, she did it. I never got a call saying, "I called her, but your case manager never called me back," or "Your case manager didn't do what she said she was going to do." When an agency had a hassle with a client, or when a kid didn't show up for class, the case manager would get a call. In no time, she'd be on the phone to the client or go out to their home. She put the kids first, and did whatever it took to do the job right.

The Case Management Process

CHR Let's talk a bit about the case management process. How many kids did your case managers work with, and where did they come from?

DELANEY Our case managers had a caseload of about 25 kids at any one time. Some kids were referred directly to BERC by the criminal justice system — the state's Department of Youth Services. Other clients came from our partner agencies — they'd often come across a court-involved kid during their regular intake processes and would divert that kid directly into BEEP. They'd walk the kid over to us and let BEEP take over.

CHR What happened next?

DELANEY First, the client was assessed by a case manager. The case manager would spend at least the first half hour just getting to know the kid — no writing, no forms, no programs shall. It gave the kid a chance to relax, and to get to know and trust the case manager a little.

Then the case manager would start the intake process by finding out what the client's interests and needs were. Most of the kids wanted jobs. A few wanted education — whether it was getting a GED or an alternative high school diploma, or even getting back into the public school system. If the kid hadn't been out of school that long, sometimes we could do some troubleshooting and get him back in his old school, or maybe get him transferred to another school. A representative of the school department was on our collaborative council, so that gave us some clout.

Meeting Immediate Needs There were plenty of other things the kids needed that the case manager would identify. Right away, we'd handle a kid's most immediate needs. If a kid hadn't eaten for a while, we'd get 'em to McDonald's. Subway tokens. Pocket money. There was a small Army-Navy store where we could send a kid for clothes. We had our own checkbook for client services — that was an invaluable resource.

Anyway, we'd define the kid's perceived needs, and we'd let the kid know what reality was — sometimes we saw needs the kid didn't know about. Then we'd set priorities among whatever services the kid and the case manager agreed were needed. Some testing usually came next. When kids needed education, the case manager would walk them over to one of the two educational programs charged with testing. Based on test results, we'd make sure that the kid got immediate enrollment in whatever program he or she needed first. If we had done our job right, the collaborative offered that program.

The important point is that when I say "enrolled," I mean enrolled in a day or two. With court-involved youth, if we didn't move quickly we'd lose them. We *had* to respond to their immediate needs. With an at-risk population, you regularly get kids who need something important right away. If you can't handle that, the rest of your services will never take hold. These kids aren't used to waiting around when someone promises them something down the road. They've been burned too many times by unfulfilled promises. But if you give them something they need up-front, they'll listen to you more later.

Making the Collaborative Work

BEEP could do this because priority placements were agreed to up-front, by all the agencies who joined the collaborative. But the real key was the fact that BEEP was organized and governed jointly. The first thing we did was establish a collaborative council that met regularly to design the program, govern its implementation, and monitor operations. It was through that council that we hashed out what we would do, what our expectations were, and what each agency had to do to fulfill its part of the bargain.

CHR What kind of role did the council play?

DELANEY It really was a problem-solving forum. For example, we had several of the

city's JTPA people sitting on the council. There were plenty of times when we made them squirm, but they were good people who were committed to kids. They'd go back to their offices and see if they could find ways to make the council's moves "acceptable" to the government. Sometimes, though, we had to say to them, "You can leave or close your ears, but this is the way we are going to do it."

But more important, the council was there to solve our internal problems. The collaborative was new. We hadn't thought everything out completely, and we did run into questions about who was really in charge of a kid's case. Each agency had its own philosophy and structure for dealing with kids. Each had its own counselors. Each felt protective of turf and hesitated to give up authority.

As I mentioned before, one of the central issues was the case manager's authority and ability to demand enrollment. One way we solved that was by having case managers participate in the collaborative board meetings so that they could quickly get to know the agency directors personally, and vice-versa. Then the case managers could call agency directors. After that, it was only when some difficulty was encountered that I'd be called upon to intervene. And after about six months, when everybody had time to learn how to work together, it was rare for me to have to do even that.

No Easy Solutions. Of course, this is not to say that everything came easy. Not all of the agencies bought in to this approach immediately. After all, it wasn't easy for them to move away from their established ways of doing things. It was uncomfortable to take risks, especially when some of the risks might offend the funders. There were several council members with whom I had to spend a lot of time – many private lunch meetings – persuading them to break away from their usual ways of doing business. But after getting past their reluctance, their unwillingness to take a chance, I was able to get them to give it a try. And once they saw that they could handle things without a major crisis, they bought in and had some fun with the rest of us.

Flexible Funds

CHR: Do you think BEEP would have been as effective if you didn't have the funds to buy slots?

DELANEY: I think a collaborative like this has to have some unrestricted money available for collaboration, purchase of services, meeting kids' immediate needs, and the like. And on the institutional end, no agency should get hurt financially because it chose to work with other institutions. With BEEP, if an agency didn't have funding to do what we needed, we were able to slide some money their way. That helped. For example, one of the education sites was funded to serve 16 through 21 year old youth. I needed them to take a few kids who were 14 years old. Their funders wouldn't cover those kids, so BEEP did. And I'll tell you, having *personal* financial support money – pocket money, food and clothing money – was essential.

Barriers

CHR: What do you see as the biggest barrier to making a case management collaborative work?

DELANEY: Probably the biggest barrier occurs when funding agencies don't recognize that services for at-risk kids, collaboratives, and case management all take time and don't work well under traditional rules. Partnerships among institutions and solid case management systems take lots of time to put together. If funders push for immediate results, they get poorly planned, rushed systems that produce poor results.

Leadership

CHR: You played the central role in organizing BEEP and pulling together the collaborative. If another city was thinking of organizing a case management partnership, what kind of person would you tell them to look for to head the effort?

DELANEY: Keep in mind that what we've talked about most is *starting* the BEEP collaborative. For any collaborative to get off the ground, it has to have a leader...a visionary. I had to do a lot of up-front work where it was *my* vision, and I was the person taking the risks. So, you need someone with an idea who is willing to pursue it.

Second, the person who brokers a collaborative has to be prepared to spend *lots* of time on it. That is probably the most important lesson. For the first eight months of BEEP, I spent *over half* of my time on it – and I had my own agency to run too. I never expected

continued on page 15

CHR Notes

by Erik Butler

As the articles in this issue suggest, our initial emphasis on employment and training programs for disadvantaged youth has gradually broadened to encompass not only training, but linkages with education, welfare, housing and the like. Today, the focus of much of our work, and that of the field as a whole, is on the design of *comprehensive* programs and systems, and the development of the community-wide partnerships needed to bring them into being.

Foundation Innovators

Much of that shifting focus has been the result of innovations introduced by demonstration projects launched by private foundations. We have reported on a few of them previously in *Youth Programs*. The Edna McConnell Clark Foundation has shown consistent commitment to the concepts of local partnerships and, more recently, to early interventions aimed at middle school-aged at-risk youth. The Ford Foundation has been a major supporter of basic skills education in youth employment programs. The Rockefeller Foundation helped to begin the Youth Practitioners' Network here at Brandeis, and recently launched the Community Planning and Action Projects in six cities, reported on briefly in our last issue. And the Commonwealth Fund, Gannett Foundation, and the MacArthur Foundation have helped us launch our own Career Beginnings program. Many other corporations and foundations – Aetna, Taconic, IBM, Public Welfare, Primerica, Lilly, Pillsbury, Hewlett, W.T. Grant, Carnegie, Arco, to name just a few – have similarly shown not only general support for the field, but a real willingness to lead and to innovate.

The Casey Foundation

One of the latest foundation players is also, nearly overnight, one of the most significant. The *Annie E. Casey Foundation*, established by Jim Casey, one of the founders of the United Parcel Service, has fully dedicated its considerable resources to programs and services for disadvantaged and at-risk children and youth. Although the Casey Foundation has for years operated an impressive foster care program, the recent death of Jim Casey has prompted a dramatic growth in its activities. As a result, in addition to major programs in juvenile justice and child welfare, the Casey Foundation has launched one of the most exciting youth initiatives in the country: *New Futures*.

New Futures

The New Futures initiative is a five city effort to create community-wide strategies for serving at-risk young people aged 12-18. Over the next five years, Dayton, OH; Lawrence, MA; Little Rock, AK; Pittsburgh, PA; and Savannah, GA will receive an average of $10 million each to develop collaborative structures and systems that knit together all the agencies and organizations responsible for serving youth and that result in an integrated, case-managed system for delivering youth services.

The goals of New Futures are ambitious. Through early intervention and significant institutional change, the initiative aims to:

- improve academic achievement and reduce school dropout rates;
- reduce the incidence of teenage pregnancy and parenthood; and
- reduce rates of youth unemployment and inactivity.

For educators in the five cities, New Futures translates into a major school reform initiative. For employment and training practitioners, the challenge will be to integrate JTPA and non-JTPA resources into a coherent system. For people concerned about teen pregnancy, New Futures offers an opportunity to access the major youth-serving institutions in each community. And for those interested in collaborative systems, from job and education compacts to case management, New Futures means learning about partnership on a scale never before attempted.

The New Futures Institute

The Center for Human Resources is pleased to have been selected to develop and operate the *New Futures Institute*, the technical assistance resource for the New Futures initiative. During the next few years, we will be providing staff and board training, information, and technical assistance services to the people in all five cities and working with the Casey Foundation to assure the cities the best possible chance of meeting the impressive challenges of an ambitious undertaking. We are very excited at the prospect of helping to make this initiative work and at learning a great deal more than we know today about system-building and collaboration. We will use this space to report on progress in the five cities and to speculate about what the experience means for our field.

Case Management, continued from page 7
design – in partnership with clients – a strategy of predictable remediation and support. Case managers should learn to conceptualize the importance of family, group, community, and social policy as they effect schemes of intervention. They should understand the components of accountability – a good case record, and clear entries for intake, referral, service delivery, termination, and follow-up. Case managers should be able to define and give examples of advocacy techniques. Finally, case managers must grasp the need for partnership – agency coordination and institutional collaboration – and understand the barriers which stand in the way of building such alliances, and how these barriers can be overcome.

The Case for Case Management

In the end, case management cannot be seen as a cure-all for all the problems of serving at-risk youth. It is difficult to implement, time-consuming and resource intensive to operate well, and depends on the willingness of established institutions to change their long-standing ways of doing business.

But case management still has much to offer practitioners serving at-risk youth. When given the care and attention required, a case management approach can provide an essential measure of coordination and support for youth in need of assistance. And as human service professionals confront increasingly complex problems and seek new ways to respond, case management can provide a valuable conceptual framework in which services can be planned and new techniques for bringing those plans into operation.

This article draws on research conducted by Andrew Hahn, Paul Aaron and Chris Kingsley at the Center for Human Resources for the New York Community Trust and the Exxon Education Fund. It also builds on the Center's work for the Annie E. Casey Foundation's New Futures initiative. This and additional material form the basis for a forthcoming (Spring, 1989) Center for Human Resources publication on effective case management practices. For more information on that publication, write Chris Kingsley at The Center for Human Resources, The Heller School, Brandeis University, 60 Turner Street, P.O. Box 9110, Waltham, MA 02254-9110.

BEEP Collaborative, continued from page 13
that kind of time commitment, and it was tough. But, BEEP looked so good, it was such a challenge, and its potential benefits to kids seemed so important, that it was worth the effort. I had a vision of how it should be, and I wanted that vision and dream to be a reality.

Clearly, another important qualification is the ability to be very persuasive. You have to be able to get other people to buy-in to your ideas. You also have to be willing to fight hard. There will be plenty of barriers that hinder collaboration. The leader has to fight many of them. When the heat comes down on you, you have to be able to handle it.

Finally, BEEP may sometimes sound like *my* program. But I hope I've made it clear that a prime qualification is the willingness to transfer ownership to other partners. Although BEEP *started* as my idea, in the end, we all owned it. If you talked to the other agency directors in BEEP, they'd say that it was their program too. There was a lot of pride in what *we* did...you could see that pride of ownership in the council meetings.

CHR: What kind of a difference did BEEP make for its clients?

DELANEY: Several of the agencies told me that they couldn't have done a good job with court-involved kids were it not for BEEP. They needed the extra support that case management provided.

At the systems end, I think that BEEP's single entry point and case management approach were very important. Tough kids don't go around telling their life histories over and over again. BEEP gave them the opportunity to bare their souls once and only once. I think kids appreciated that and stuck around.

Lastly, we let kids know that they weren't alone, and I think they valued that. They had a caring case manager to talk to. The case manager was theirs – someone they could call to complain to. And when a kid hit a barrier and thought that he or she couldn't continue, the case manager's intervention, and the help that resulted, often made the difference between completing the program or dropping out.

Youth Programs
A publication of the Center for Human Resources, The Heller School, Brandeis University, Waltham, Massachusetts and the National Youth Practitioners' Network.

This issue of *Youth Programs* is published with the assistance of a grant from U.S. Department of Labor. The information and opinions herein do not necessarily reflect the policy or opinions of that organization.

Brandeis University
Center for Human Resources
The Heller School
60 Turner Street
P.O. Box 9110
Waltham, Massachusetts 02254

Non Profit
Organization
U.S. Postage
PAID
Permit No. 15791
Boston, Mass.

SANDRA KERKA
ERIC CLEARINGHOUSE
NATL CEN FOR RES IN VOC E
1960 KENNY ROAD
COLUMBUS OH 43210